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DOCKET: FIS920010111US1

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

INVENTOR:	Mukta G. Farooq et al.	)	EXAMINER:	Lynne Edmondson
		)		
SERIAL NO.:	09/912,192	)	ART UNIT:	1725
		)		
FILING DATE:	July 24, 2001	)	DATE:	October 21, 2003
		)		
FOR:	NOVEL REWORK	)		
	METHODS FOR Pb			
	FREE BGA/CGA			

**AMENDMENT**

Mail Stop NON-FEE AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Responsive to the Office Action mailed July 25, 2003, please reconsider the above-identified application in view of the following amendments and remarks.



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IBM Docket No. FIS920010111US1

1725

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
TC 1700

Amendment Response/Transmittal

In re application of: Mukta G. Farooq et al.

DeLIO & PETERSON, LLC  
121 Whitney Avenue  
New Haven, CT 06510-1241

Serial No. 09/912,192

Filed: July 24, 2001

For: NOVEL REWORK METHODS FOR Pb FREE BGA/CGA

Mail Stop NON-FEE AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir: Date: October 21, 2003

Transmitted herewith for filing is an **Amendment/Response** in the above-identified Application. No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	Other Than Small Entity
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE ADDITIONAL FEE
TOTAL 6	MINUS 20	= 0	x \$ 18.00 = \$ 0
INDEPENDENT 2	MINUS 3	= 0	x \$ 84.00 = \$ 0
1ST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS			
		\$280.00	\$
		TOTAL	\$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3

\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest No. Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

 Please charge the Assignee IBM Corporation Deposit Account No. 09-0458 in the amount of \$ 0. A duplicate copy of this sheet is enclosed. The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0458. A duplicate copy of this sheet is enclosed. Any additional filing fees required under 37 C.F.R. §1.16. Any patent application processing fees under 37 C.F.R. §1.17.

<input type="checkbox"/> CERTIFICATION OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the Assistant Commissioner for Patents on the date shown below.
<input checked="" type="checkbox"/> CERTIFICATE OF MAILING UNDER 37 CFR 1.8 I hereby certify that I am depositing the enclosed or attached correspondence with the United States Postal Service as first class mail in an envelope addressed to Mail Stop NON-FEE AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on <u>October 21, 2003</u> Carol M. Thomas
Name of person mailing paper <u>Carol M. Thomas</u> Signature
10/21/03 Date

Respectfully submitted,

BY:

  
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